



Please complete the application and provide copies of the following documents listed below and return to our office. Eligibility for the program is not retro-active and the discount (if approved) is applied to future bills after your eligibility has been approved for the program. Applications are processed in the order they are received.

Government issued Identification for all persons 18 years and older; Please provide a copy of one of the items below for each adult:

- State driver's license
- State identification card
- Passport or Permanent Resident Card

Housing Status (Applicants residing in subsidized housing are not eligible)

- Renter: Current lease/rental agreement and current rent payment receipt
OR have your landlord complete the enclosed statement from Landlord form.
- Homeowners: Mortgage statement or if no mortgage statement, send property tax statement

Income documentation for ALL persons 18 years old and older living in your home. Please provide verification of GROSS income received in the following months:

Month:

Month:

Month:

- Paycheck stubs/ Employer statement showing GROSS earnings
 - DSHS award letters (TANF, GAU/GAX)
 - Child support
 - Social Security/SSI award letter/Survivor benefits
 - Pensions/Annuity/IRA, Interest & Dividends
 - Labor and Industry (L&I) statement
 - Student financial aid statement
 - Rental/investment property income (Provide a copy of lease/rental agreement.)
 - Self employed (Most recent full tax return & 3 months profit & loss statements)
 - Please have _____ complete the highlighted sections and sign the enclosed "Request for Records" form and mail it with your application.
- Other income: _____

Primary Name on Electric Bill:						
	Last		First		Middle	
Physical Address:						
	Street		Apt#	City	Zip	
Mailing Address:						
	Street		Apt#	City	Zip	

Primary Phone:		Message:		E-Mail:	
----------------	--	----------	--	---------	--

Seattle City Light Account Number:	01-	
Seattle Public Utilities Account number:	02-	

Questions: Please call 206-684-0268 or e-mail UDP@seattle.gov

Send application and documentation to:

Utility Discount Program

810 3rd Ave Suite #350

Seattle, WA 98104

Please complete the front and back of this form



HOUSING INFORMATION

Household members include everyone living in the home, regardless of age, whether or not they pay rent, and their relationship to applicant. Examples: roommates, relatives, tenants, children, friends, extended family members, etc.

Name (Last, First)	Date of Birth	Sex	Relationship to You	Gross Income	Income Source (employers name, Social Security, TANF, etc.)
		M <input type="checkbox"/> F <input type="checkbox"/>	Myself	\$_____ /mo	
		M <input type="checkbox"/> F <input type="checkbox"/>		\$_____ /mo	
		M <input type="checkbox"/> F <input type="checkbox"/>		\$_____ /mo	
		M <input type="checkbox"/> F <input type="checkbox"/>		\$_____ /mo	
		M <input type="checkbox"/> F <input type="checkbox"/>		\$_____ /mo	

Total number in household: ____ If more than 5, list other household members on a separate page.

Source of income or benefits (please check all that apply):

- ☐ Wages
- ☐ Unemployment
- ☐ Child Support
- ☐ Adoption Support
- ☐ TANF
- ☐ Pension/Annuity
- ☐ IRA
- ☐ VA
- ☐ Rental income
- ☐ GAU
- ☐ Social Security/SSI
- ☐ Other : _____

HOUSING INFORMATION

Amount you pay for rent or mortgage: \$ _____

Housing Status: Select One

- If rent is subsidized (check one)
- ☐ Seattle Housing Authority
- ☐ HUD
- ☐ Section 8/Scattered site/Shelter plus care
- ☐ King County Housing Authority
- ☐ Senior BOND
- ☐ Other: _____

Housing Type: Select one

How do you heat your home? ☐ Electric ☐ Gas ☐ Oil ☐ Wood Other: _____

Cable TV customers may qualify for a low-income discount. If you subscribe to Cable TV, which company? ☐ Comcast ☐ Broadstripe ☐ Other: _____

OPTIONAL INFORMATION

How do you Identify Yourself: ☐ American Indian, Alaska Native ☐ Asian American/Asian ☐ Black, African American, African ☐ Hispanic, Latino ☐ Hawaiian Native, Pacific Islander ☐ White, Caucasian ☐ Multi Racial

What is your primary language: _____

How did you hear about our services? ☐ Radio ☐ Television ☐ Newspaper ☐ Newsletter ☐ Utility Bill insert ☐ Website ☐ Family or friends ☐ Other: _____

SIGNATURE

This application and supporting documentation are used to review eligibility for additional City benefits and will NOT be shared with U.S. Citizenship and Immigration Services (USCIS). I authorize the City to use these materials to enroll me in assistance programs for which I am eligible. I am aware that my information is subject to review and verification and that other documentation may be required. I grant permission to request or release information to, or from, the Seattle Housing Authority, Sec 8 HUD, King County Housing Authority, other government agencies, or their delegated agents; this may result in receipt or denial of City benefits. Submitting this application does not guarantee eligibility or enrollment in any programs. I certify that the information I provided is accurate and complete and that I may be subject to criminal prosecution if I have knowingly given false or misleading information. I understand that if I receive assistance and have not truly disclosed all information I will be terminated from the program(s) and the City may recover the actual cost(s) for the periods I was not eligible. I will notify the City of Seattle if my income or living situation changes.

Signature:

Date: